



JULY 2012

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FEDERAL POLICY UPDATE

CDC lowers intervention level from 10 to 5. Since 1991, the Centers for Disease Control and Prevention (CDC) considered a level of lead in a child's blood sample of 10 micrograms per deciliter (mcg/dL) as being in need of action. In May, CDC accepted the recommendation from its advisory committee to lower that level to 5 mcg/dL. The advisory committee also recommended that CDC change their guidelines so that the actions previously identified for a blood lead level (BLL) of 10 mcg/dL or greater go into effect at the new action level of 5 mcg/dL. CDC will announce any changes to their guidelines in the next few months. [Learn more](#).

Why? Overwhelming evidence demonstrates that there are significant adverse health effects of BLLs below 10 mcg/dL in children. The damage extends beyond impaired cognitive function to include damage on the cardiovascular, immunological and endocrine systems. In Wis. in 2010, this means that approximately 10,000 additional children were at-risk of these adverse cognitive and health effects. [Learn more](#).

Action at 5 mcg/dL. Wisconsin recommends that when a child's BLL is 5 mcg/dL or greater: (1) the child's capillary test be confirmed by a venous test within 1 to 3 months, (2) the child's health care provider give education to parents and monitor the child's BLLs as well as growth and development, and (3) public health officials provide early intervention services to the family, as local resources allow. [Learn more](#).

Statutory changes. Wisconsin statute (DHS Ch. 254) requires lead hazard reduction in the home of

a child with an elevated BLL (i.e., one venous of 20 mcg/dL or greater or two venous BLLs of 15 mcg/dL or greater, 90 days apart). If CDC changes the recommendations for environmental intervention for children with elevated BLLs, we will keep you informed of the process and of opportunities to provide input on potential changes to Wisconsin statute.

The policy solution. Preventing children from being exposed to lead is the best way to limit the negative effects. More resources are needed to fix the lead hazards in Wisconsin's old housing. [Learn more.](#)

LEGISLATIVE UPDATE

The Senate Appropriations Committee increased the funding for the CDC Healthy Homes and Lead Poisoning Prevention program from \$2 million in fiscal year 2012 to \$10 million in fiscal year 2013.

This is a major victory, but the fight is not over. The House also must agree on this level of funding.

What you can do:

Please [contact your representatives](#). **Make phone calls as individual constituents.** Talking points are included below.

My name is XXXXX, and I am from [city]. [If leaving a voice mail message - my phone number is XXX-XXX-XXXX] I am calling about the Healthy Homes and Lead Poisoning Prevention program at the Centers for Disease Control and Prevention (CDC). I ask that you allocate a minimum of \$10 million for this program.

Lead poisoning causes brain damage. It reduces a child's ability to learn and causes lifelong behavioral and health problems, like high school dropout, violent crime and heart failure. Lead poisoning is completely preventable.

Wisconsin consistently ranks in the top 10 nationwide for the number of children found to be lead poisoned (BLLs of 10 mcg/dL). Since 1996, more than 47,000 Wisconsin children have been identified with lead poisoning, more than 1,300 alone in 2010.

CDC recently lowered the BLL from 10 to 5 mcg/dL, which in 2010 would have identified an additional 10,000 kids that required care. More than 400,000 Wisconsin homes built before 1950 have lead-based paint hazards, meaning the



risk of lead poisoning for Wisconsin children remains extremely high.

Please act on behalf of Wisconsin children and allocate a minimum of \$10 million for the CDC Healthy Homes and Lead Poisoning Prevention program funding in the 2013 budget.

A reduction in CDC funding threatens Wisconsin children, resulting in a drastic reduction in quality of basic services provided through the Wisconsin Childhood Lead Poisoning Prevention Program (WCLPPP). Examples of these services include (select one or two):

- Wisconsin conducts targeted blood lead testing of children, based on age of housing, income status and sibling lead poisoning. Children who are lead poisoned receive follow up, education for families on possible lead exposure, home inspection and ordered remediation of lead hazards.
- Wisconsin environmental health statute DHS Ch. 254 requires the development and implementation of a comprehensive statewide lead poisoning prevention and treatment program, including providing state funded grants to local agencies. One million dollars of state funding is distributed annually.
- Critical partnerships would not continue without CDC funding. The WCLPPP helps to ensure compliance with Medicaid for blood lead testing services for eligible children resulting in an increase in the testing of 20,000 more children annually. WCLPPP partners with Women, Infants and Children (WIC) to provide blood lead testing for 38% of Wis.'s children.
- CDC funds data analysis and mapping to target interventions. This surveillance has enabled Wis. to target scarce resources to help communities and property owners find and fix hazards in high-risk housing before children are severely lead poisoned.
- Surveillance data is used to help communities secure lead hazard reduction funds from the U.S. Department of Housing and Urban Development (HUD). Over 20 years, Wis. has garnered more than \$40 million in funds from HUD and other agencies for lead hazard reduction. Without surveillance data, the ability to compete for federal funds, track trends in lead poisoning across the state or identify a possible resurgence in BLLs is largely restricted.

Lead poisoning is completely preventable. Children protected for lead exposure are less likely to need special education or be arrested for criminal activity, a significant cost to us all. **Again, please act on behalf of children of Wisconsin and allocate a minimum of \$10 million for the CDC Healthy Homes and Lead Poisoning Prevention program funding in the 2013 budget.**

Thank you for your support.

ADVOCACY UPDATE

"Mom on a mission" filming feature-length documentary about lead poisoning

"[MisLEAD: America's Silent Epidemic](#)" is a ground-breaking documentary about the hidden epidemic of childhood lead poisoning in America today. The filmmaker, Tamara Rubin, founded the non-profit Lead Safe America Foundation after her own sons were poisoned in their historic home in Portland, Oregon. "MisLEAD" is an American travelogue that weaves together many families' personal stories with highly provocative interviews with government insiders, experts in science, economics and history, and celebrities. The primary focus of the film is on the importance of lead-safe work practices as primary prevention for childhood lead poisoning.



Learn more about the movie on [Facebook](#).

Learn more about the [Lead-Safe America Foundation](#).

Wisconsin funding shortages discussed in USA Today article

In the July 12 [USA Today article](#), "[EPA, CDC officials testify to Senate on child lead poisoning](#)," Wisconsin was used to demonstrate how funding cuts would affect state lead poisoning prevention programs. Henry Anderson, MD, Wisconsin state health officer, was quoted.

PROGRAM UPDATE

The WCLPP will apply for a no-cost extension of the current year's CDC healthy homes grant that ends August 31. While the no-cost extension does not include any new federal funds, it does allow WCLPPP to continue its work on the current grant objectives through June 30, 2013.

The three Implementation and Oversight Committee (IOC) subcommittees (education, housing and resources, and blood lead testing) continue to work on their respective activities. [Learn more](#).



STAY TUNED

The Implementation and Oversight Committee (IOC) co-chairs and WCLPPP staff will continue to share information and opportunities for the future. Once the strategies for the upcoming year are clearly identified, an IOC meeting will be scheduled. This could potentially be a teleconference call in the fall.



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